

FEC FORM 9**24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS****1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations**

(a) Name

Lanter Project

(b) Address (number and street) check if different than previously reported

1735 Market Street Suite A425

(c) City, State and ZIP Code

Philadelphia PA 19103

(d) Name of Employer or Principal Place of Business

N/A

2. FEC Identification Number

C

(e) Occupation

N/A

3. Is This Statement New

or

Amended

4. Covering Period

09 23 2006

through

10 03 2006

5. (a) Date of Public Distribution(s)

10 03 2006

(b) Communication Title

Capital + DC

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10?

Yes

No **7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?**

Yes

No **8. Custodian of Records**

(a) Name

Alicia Alexion

(b) Address (number and street)

1735 Market Street, Suite A425

(c) City, State and ZIP Code

Philadelphia PA 19103

(d) Name of Employer or Principal Place of Business

(e) Occupation

Self Employed

Consultant

9. Total Donations This Statement

57,000.00

10. Total Disbursements/Obligations This Statement

75,000.00

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Alicia Alexion

SIGNATURE

Alicia Alexion

DATE

10\3\2006

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.